

1st Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE       |
|---------------------------|----------|--------|------------|
| FEE DETERMINATION         |          |        |            |
| O.I.P.E. CLASSIFIER       |          |        | 10-2-21-01 |
| FORMALITY REVIEW          | 12       | 720    | 05-18-11   |
| RESPONSE FORMALITY REVIEW | CM       | 935    | 05-24-01   |

# INDEX OF CLAIMS

✓ ----- Rejected      N ----- Not-drafted  
 \* ----- Allowed      I ----- Withdrawn  
 - (Through numeral) ----- Cancelled      A ----- Appeal  
 + ----- Restricted      O ----- Oligated

| Claim | Date | Claim | Date | Claim | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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